

MAR 07 2024

UNITED STATES DISTRICT COURT

for the

PER 
DEPUTY CLERKMiddle District of PennsylvaniaHarrisburg DivisionJerry - Lee : Hollinger, bene
Michelle-Lynn : Hollinger, bene
Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Case No.

1:24-CV-401
(to be filled in Clerk's Office)Jury Trial: (check one) ☐ Yes ☐ No

Judge Matthew S. Menges
Allison Blew, Prothonotary
Sheriff Richard P. Keuleber
Christine Graham, McCabe, Weisberg &
Nathalie Paul, Conway LLC
Marissa Myers-Cole
Defendant(s) Laura Shae-Recorder of Deeds
(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS
(Non-Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Address

County

Telephone Number

E-Mail Address

terry-lee: hollinger, beneficiary
 michelle-lynn: hollinger, beneficiary
 90 east butter road 325
 York PA 17404
 York City State Zip Code
 York
 717-880-9354
 micks hoemaker@hotmail.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name

Job or Title (if known)

Address

County

Telephone Number

E-Mail Address (if known)

Matthew D. Menges
 Judge
 York County Court of Common Pleas
 York PA 17401
 York City State Zip Code
 York
 717-771-9964

☐ Individual capacity
 ☒ Official capacity

Defendant No. 2

Name

Job or Title (if known)

Address

County

Telephone Number

E-Mail Address (if known)

Allison Blew
 Prothonotary
 York County Judicial Ctr, 45 N. George St. 4th Fl.
 York PA 17401
 York City State Zip Code
 York
 717-771-9611
 A.Blew@yorkcounty.pa.gov

☐ Individual capacity
 ☒ Official capacity

Defendant No. 5

Richard P Keuleber

Sheriff

45 N. George St, 1st floor

York, PA 17401

York

717-771-9601

official capacity

Defendant
~~Defendant~~ No. 6

Marisa Myers Cohen

attorney

1420 Walnut St. Ste 1501

Philadelphia, PA 19102

Philadelphia

215-790-1010

escalatedpa@mwc-law.com

official capacity

Defendant No 7

Laura J Shue

Recorder of Deeds

28 East Market St.

Suite 122

York, PA 17401-1590

York

717-771-9295

LShue@yorkcountypa.gov

official capacity

- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

An answer was submitted on 9/29/2023, it was rejected for not being one document by the Prothonotary office. Stated we had 14 days from 10/2 to resubmit. On 10/4, there was a judgment by default. See attached for other violations

III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. Where did the events giving rise to your claim(s) occur?

York County Court of Common Pleas -
See attached
~~Starting date 10/18/22 through present~~

- B. What date and approximate time did the events giving rise to your claim(s) occur?

starting date 10/18/22 through present

- C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

unlawful conversion of property
fraudulent conveyance
denial of right to defend
blatant ~~gross~~ ignoring of facts

IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

With the attempts to claim property + homestead after full payment has been offered and apparently rejected, the many phone calls/mailings/people showing up at the door for information to purchase the impending "foreclosure" property has cause great upset to the animals, causing anxiety, stress, depression, emotional stress on all occupants. I have increased pain from fibromyalgia due to stress also heart palpitations which increase blood pressure which is detrimental to my aortic aneurysm. All the above has created events to which Terry is the only one of us who is able to work.

V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

- I wish a court of equity to please accept any mistakes we have made and void the order made on 10/4/23.
- I wish the court to order refund/return all funds paid and procured on ledger
- I require the court to do a full audit of accounting
- I wish the court to consider a prayer of monetary relief to cover pain and suffering whatever is deemed appropriate.
- I ask the court for rescission any and all signatures to contracts

Not necessarily in the stated order, I pray this court would consider this, and review with justice.

Collapse the deed trust.

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: January 17, 2024

Signature of Plaintiff

Printed Name of Plaintiff

By: Terry - Lee: Hollinger, beneficiary
 By: Michelle-Lynn: Hollinger, beneficiary
 By: Terry-Lee: Hollinger, beneficiary
 By: Michelle-Lynn: Hollinger, beneficiary

B. For Attorneys

Date of signing: _____

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address




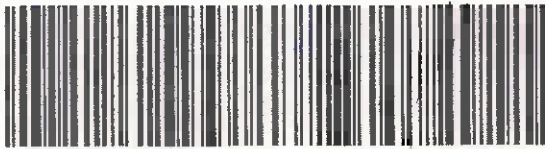
City

State

Zip Code

Telephone Number

E-mail Address

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